

RECEIV

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Fee Paid	10.00
Date 2	19/96

FEB 0 5 1996State of Washington DEPAPPRICATION for a Water Right Please follow the attached instructions to avoid unnecessary delays.

Vame Purewal	Farms	Ltd.		Home Tel:	604)	94-	9968
Mailing Address/	2755 58	3 A AVE		Work Tel:()		
City Surrey	S	Fate B.C. Zi	ip+4_1/3×-	3ky+ FAX	:()		
Section 2. CO Same as ab	ove						
Name Girmak Mailing Address 16 City Survey	h Singh	Pure	wal	Home Tel:	(601) S	94 -	9468
Mailing Address	1755 5	58 A AU	Ê,	Work Tel:()		
City Surrey	S	tate B.CZi	ip+4_V3X-3	KY+FAX	:()		
telationship to appli	cant Owner						
Section 3. ST.	ATEMENT	OF INT	ENT				
The applicant reques cubic feet per sectourpose(s) of description of the plane. Estimate a maximum	ce of use. (So	ee instruction	ns.) NOTE:	A tax parcel number	r or a plo	Attach ut numbe	per minute or one) for the a "legal" r is not sufficient.
needed: From	TER SOU	IRCE					
needed: From Section 4. WA	TER SOU			If GROUNDWAT			
needed: From Section 4. WA If SURFACE WA Name the water soulake, etc. If unnamed stream,"	TER SOU	TRCE	spring,		ER		well(s).
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ECY 040-1-14 Rev. 12/94 F

APPLICATION

51.27701 Appl. No.:

Sec	ction 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named:
B.	Briefly describe your proposed water system. (See instructions.)
C.	Do you already have any water rights or claims associated with this property or system? YES NO PROVIDE DOCUMENTATION.
	ction 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION ompleted for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection
B.	Are you within the area of an approved water system? (Homes, Apartment, Recreational, etc.) If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Con	nplete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION omplete for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated: 40
В.	List total number of acres for other specified agricultural uses:
	UseAcres
	Use Acres Use Acres
C.	Total number of acres to be covered by this application: 40
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application;
	‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 2000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no:
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking



Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

□ YES □ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

474 W Hemmi Road Bellingham, Wahington

Zip Code 98225

Section 10. REQUIRED MAP

Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

- YES NO Does the applicant own the land on which the water will be used? A. If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):
- B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:

YES - NO

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with

Applicant (or authorized representative)

Landowner for place of use (if same as applicant, write "same")

Date $\frac{3AN29/96}{96}$

We are returning your application for the follow	ing reason(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98503-0210
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information reques	ted above and return your (date).	application by
	Date	

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or

APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

(360) 407-6006 (TDD).

EXHIBIT "A"

THE LAND REFERRED TO IS SITUATED IN THE STATE OF WASHINGTON, COUNTY OF WHATCOM AND IS DESCRIBED AS FOLLOWS:

THE WEST ONE-HALF OF THE SOUTHWEST QUARTER OF SECTION 13, TOWNSHIP 39 NORTH, RANGE 2 EAST OF W.M., EXCEPT THE NORTH 10 FEET THEREOF. EXCEPT THE SOUTH 910 FEET OF THE WEST 480 FEET OF THE EAST 920 FEET THEREOF. EXCEPT THE EAST 440 FEET OF THE SOUTH 1,980 FEET THEREOF. EXCEPT ALSO, COUNTY ROAD NO. 254, KNOWN AS WEST HEMMI ROAD. EXCEPT THAT PORTION AS CONVEYED UNDER AUDITOR'S FILE NO. 901025058, DESCRIBED AS FOLLOWS:

THAT PORTION OF THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 13, TOWNSHIP 39 NORTH, RANGE 2 EAST OF W.M., DESCRIBED AS FOLLOWS:

BEGINNING AT THE SOUTHWEST CORNER OF SAID SECTION 13; THENCE EAST ALONG THE SOUTH LINE THEREOF, A DISTANCE OF 250 FEET; THENCE NORTH 910 FEET; THENCE WEST 250 FEET MORE OR LESS TO THE WEST LINE OF SAID SECTION 13; THENCE SOUTH TO THE POINT OF BEGINNING. EXCEPT WEST HEMMI ROAD ALONG THE SOUTH LINE THEREOF.

SITUATE IN COUNTY OF WHATCOM, STATE OF WASHINGTON

53,p. 530

Vol: 458 Page: 566 File No: 950828173

FILED FOR R	ECOND AT REQUEST OF	
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WHEN RECO	PADED RETURN TO	
Name	JAMES A. WYNSTRA, ATTORNEY AT LAW	
Address	506 W. GROVER STREET, P.O. BOX 409	
City, State, Zi	LYNDEN, WA 98264	
W-109	ALILIG	_
w 10	Quit Claim Deed	
	NTOR GURMUKH PUREWAL, a married man; BALWINDER PUREWAL, a married man;	

THE GRANTOR GURMUKH PUREWAL, a married man; BALWINDER PUREWAL, a married man and JARNAIL S. PUREWAL, a married man for and in consideration of Transfer to closely held corporation conveys and quit claims to PUREWAL FARMS, LTD., a Washington corporation

the following described real estate, situated in the County of Whatcom

together with all after acquired title of the grantor(s) therein:

State of Washington,

SEE EXHIBIT A WHICH IS ANNEXED HERETO AND BY THIS REFERENCE INCORPORATED HEREIN.

MHATCOM COUNTY
BELLINGHAM, NA
88/28/95 4:04 PM
REQUEST OF: /MLT
Shirley Forslof, AUDITOR
BY: LK, DEPUTY
\$8.08 DEED
Vol: 458 Page: 565
File No: 950828173

Dated AUGUST 11, 19 95

Shared AUGUST 11, 19 95

Shared AUGUST 11, 19 95

BATWINDER PUREWALLIAdividual)

BATWINDER PUREWALLIAdividual)

Dated AUGUST 11, 19.95 GURMUKH PUREWAL(Individual) BALWINDER PUREWAL(Individual)	Jarnail S. Purawal
eg N	
STATE OF WASHINGTON COUNTY OF WHATCOM On this day personally appeared be or ware On the use and purposes therein mentages. State of the washington State of the ware on the country and the died of the uses and purposes therein mentages. On this day personally appeared be or ware On this day personally appeared by the same appeared by	STATE OF WASHINGTON COUNTY OF
day of	GIVEN under my hand and official scal this day of, 19, Notary Public in and for the State of Washington, residing at